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Atty Docket No. 014058-012840US

PTO FAX NO.: 1-571-273-8300

ATTENTION: Examiner Emily Le

Group Art Unit 1648

OFFICIAL COMMUNICATION
FOR THE PERSONAL ATTENTION OF
EXAMINER EMILY LE

CERTIFICATION OF FACSIMILE TRANSMISSION

I hereby certify that the following documents in re Application of DAVID A. JOHNSON ET AL., Application No. 10/043,086, filed January 8, 2002 for AMINOALKYL GLUCOSAMINIDE PHOSPHATE COMPOUNDS AND THEIR USE AS ADJUVANTS AND IMMUNOEFFECTORS are being facsimile transmitted to the Patent and Trademark Office on the date shown below.

Documents Attached


1. USPTO Transmittal Form
2. Petition for Extension of Time - Three (3) months indicated
3. Submission Of Terminal Disclaimer Under 37 CFR 1.116 Expedited Procedure – Examining Group 1641
4. Terminal Disclaimer To Obviate A Double Patenting Rejection Over A "Prior" Patent

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Number of pages being transmitted, including this page: eight (8)

Dated: September 6, 2005


Lois M. Simon

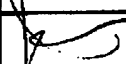
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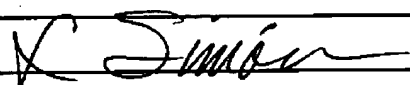
TOWNSEND and TOWNSEND and CREW LLP
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60580326 v1

PTO/SB/21 (09-04)

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/043,086
	Filing Date	January 8, 2002
	First Named Inventor	Johnson, David A.
	Art Unit	1648
	Examiner Name	Emily Le
	Attorney Docket Number	014058-012840US
Total Number of Pages in This Submission		7

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input checked="" type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Townsend and Townsend and Crew LLP		
Signature			
Printed name	Joel G. Ackerman		
Date	September 6, 2005	Reg. No.	24,307

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